Emergency in Ukraine



External Situation Report #15, published 16 June 2022 Reporting period: 2–15 June 2022





7.1 million
INTERNALLY
DISPLACED



10046
CIVILIAN
CASHALTIES



4481
CIVILIAN
DEATHS

Key updates

- According to WHO's Surveillance System for Attacks on Health Care, there have been 295 attacks on health care, resulting in 59 injuries and 76 deaths, reported between 24 February and 15 June. Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.
- Efforts are ongoing to deliver medical supplies from the WHO supply and logistics base in Lviv to affected oblasts amidst fuel shortages, limited warehouse capacity, and security restrictions due to ongoing military operations. Delivery of life-saving supplies to hard-to-reach locations remains a foremost priority for WHO.
- One in four people in Ukraine is over 60, and the impact of the ongoing war on older people, including those with disabilities, has been substantial. Essential life-saving support, as well as necessary evacuation assistance, should be provided to those who have not been able or willing to leave their homes, including those living in care institutions. On 14 June WHO released a joint statement with the Office of the United Nations High Commissioner for Human Rights (OHCHR), United Nations Population Fund (UNFPA) and HelpAge International on working towards upholding the rights and safeguard the health and well-being of older people through improving and sustaining health and social care provisions.
- Between 13 March and 12 June Emergency Medical Teams (EMTs) in Ukraine responded to 4604 outpatient visits, of which 16% (736 outpatient visits) were infectious diseases and 14% (644 outpatient visits) were trauma. Among infectious diseases, the majority (640 outpatient visits) were acute respiratory infections.
- As of 14 June at least 641 patients (78% of the requests) have been evacuated for medical reasons from Poland, the Republic of Moldova, Slovakia and Ukraine via the EU Civil Protection Mechanism to 13 European countries (Belgium, Denmark, France, Germany, Ireland, Italy, Luxembourg, the Netherlands, Norway, Portugal, Romania, Spain and Sweden).
- Please note that the Ukraine situation report will be produced on a biweekly basis.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 13 June 2022

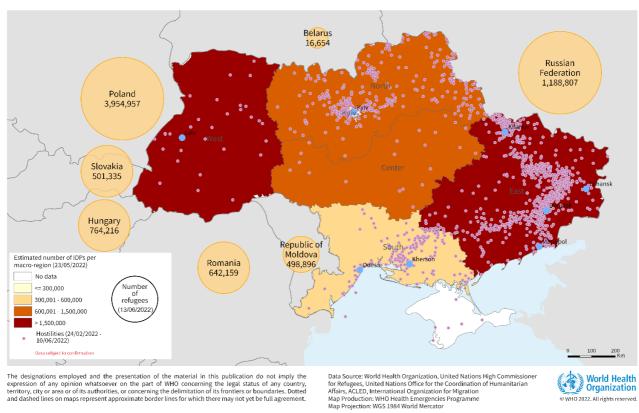


Table 1. Key humanitarian figures as of 13 June 2022

People affected	
Internally displaced persons	7.1 million
Refugees	7.3 million
Ukrainians entering Ukraine	2.4 million
Injuries among civilians	5565 (as of 15 June)
Deaths among civilians	4481 (as of 15 June)

1.1 Population displacement and refugees

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), over 7.3 million refugees have left Ukraine for surrounding countries between 24 February and 13 June, with the highest proportion, 52%, in Poland, followed by 10% in Hungary. According to the International Organization for Migration (IOM), as of 14 June approximately 7.13 million people have been internally displaced. As the crisis evolves, displacement and mobility patterns continue to change, requiring scaled-up and integrated response interventions that address both emerging and existing needs.

1.2 Overall WHO response

WHO is supporting the health sector in Ukraine and in the refugee-hosting countries. WHO has mobilized experts and is working with partners, including the Global Outbreak Alert and Response Network (GOARN), EMTs, Health Cluster, and Standby Partners, to provide support with access to health services – primary health care (PHC), routine and COVID-19 vaccination, mental health and psychosocial support (MHPSS), trauma care, supply and logistics, prevention of and response to sexual exploitation and abuse, risk communication and community engagement (RCCE), and information management.

WHO continues to support the Ministry of Health (MoH) of Ukraine and the MoHs of the refugee-hosting countries to ensure safe medical evacuation of patients. Transportation of patients within Ukraine is ensured by the national emergency services, while transportation across the border to the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) providing EMT support. As of 14 June, at least 641 patients (78% of the requests) have been medically evacuated from Poland, the Republic of Moldova, Slovakia and Ukraine via the EU Civil Protection Mechanism to 13 European countries (Belgium, Denmark, France, Germany, Ireland, Italy, Luxembourg, the Netherlands, Norway, Portugal, Romania, Spain and Sweden).

Standby Partnerships

Standby Partners have strengthened WHO's capacity for this response by confirming 18 positions to be deployed for operations in Ukraine and in the refugee-hosting countries. Most of these deployments are scheduled for six months. So far, 13 experts have been deployed and five are currently under recruitment. Roles deployed so far through Standby Partners include: MHPSS – one expert, RCCE – two experts, Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH) – four experts, Geographic Information System (GIS) – one expert, Information Management – two experts, and Health Cluster coordination – two experts. These positions are supported through Partners, including the Norwegian Refugee Council (NORCAP) – five deployments, UK-Med – two deployments, Dutch Surge Support – one deployment, the Canadian International Civilian Response Corps (CANADEM) – three deployments, and iMMAP – two deployments. The five positions under recruitment are to support operations in Poland (Partner Coordination, Information Management, MHPSS, and Gender-Based Violence) and Romania (Sexual and Reproductive Health Expert).

Funding

- WHO issued an updated appeal detailing its resource needs for Ukraine and countries receiving and hosting refugees for March–August for Ukraine and March–December for other countries. As of 15 June, WHO has received US\$ 72.8 million (49%) against its appeal for US\$ 147.5 million.
- WHO would like to thank donors who are supporting its response in Ukraine and countries receiving and hosting refugees, including: Canada, European Civil Protection and Humanitarian Aid Operations (ECHO), European Commission Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), Ireland, Japan/Asia Europe Foundation, the King Salman Humanitarian Aid & Relief Centre (KSRelief), Norway, Novo Nordisk Foundation, Switzerland, the UN Central Emergency Response Fund (CERF) and the Ukraine Humanitarian Fund (UHF), the United States Bureau of Population, Refugees, and Migration and Bureau of Humanitarian Assistance for their timely contributions.
- During the first weeks of the response, WHO released US\$ 10.2 million from its Contingency Fund for Emergencies to kick-start activities. These funds have been fully absorbed.

More information on funding can be found here.

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Ukraine's health system is facing multiple challenges. Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Health care continues to come under attack (which includes attacks against health facilities, transport, personnel, patients, supplies and warehouses), with a total of 295 attacks¹ on health care, resulting in 59 injuries and 76 deaths, reported between 24 February and 15 June.² Further attacks are being verified. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

Through engagement with the MoH, national health authorities, partners and donors, WHO has been able to provide populations with life-saving supplies, equipment and medicines. However, reaching some of the hardest-hit areas, where health systems have been severely disrupted, remains a challenge.

2.2 Priority public health concerns

Current health priorities are listed below (more details on each of these public health concerns can be found in the previously published situation reports).

Conflict-related trauma and injuries	Civilian casualties continue to rise, largely due to the use of explosive weapons. Disruption of health-care facilities and closure of many pharmacies in Ukraine has limited access to trauma care.
Maternal and newborn health	While only limited data are available on the current situation of maternal and newborn health, access to antenatal, intrapartum and postnatal care have been disrupted due to the ongoing conflict.
Management of chronic diseases and noncommunicable diseases (NCDs)	Provision of care for cancer patients continues in Ukraine, despite disruptions in health-care services.
Risk of emergence and spread of infectious diseases	The risk of disease outbreaks, such as cholera, measles, diphtheria or COVID-19, has been exacerbated due to lack of access to water, sanitation and hygiene, crowded conditions in bomb shelters and collective centres, and suboptimal coverage for routine and COVID-19 immunizations. Between 26 May and 15 June no new cases and deaths were reported. This could be due to reporting challenges resulting from the ongoing conflict. Between 23 February and 12 June, the overall number of beds available and beds occupied by patients with COVID-19 decreased by 49% and 95%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most notable decrease was reported in the Luhansk oblast (100%), followed by the Vinnytsya (88%) and Chernivtsi (84%) oblasts.
Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV)	People fleeing Ukraine, particularly women and girls, continue to face challenges and vulnerability risks as they seek safety in neighbouring countries. Prevention and protection from gender-based violence, trafficking, sexual exploitation and abuse remain key concerns.

¹ Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.

² Surveillance System for Attacks on Health Care (SSA).

Mental health and psychosocial support (MHPSS)	Psychosocial support is much needed, particularly in view of a likely increase in negative coping mechanisms, including abuse and self-harm. The MoH of Ukraine estimated that 15 million people might require psychological support and treatment due to warrelated trauma and stress. Of the 15 million, 3-4 million people potentially require medication-assisted treatment. Concerns have been raised about the long-term mental health impact of the war in Ukraine.
Technological hazards and health risks	Potential nuclear hazards There are both operational and decommissioned nuclear facilities in Ukraine. In addition, numerous radioactive sources are used in industry and in health-care facilities. According to the International Atomic Energy Agency's analysis, the current nuclear safety situation appears under control. However, the ongoing armed conflict puts nuclear installations at risk of accidental or deliberate damage and jeopardizes the security of radioactive sources.
	WHO has developed technical guidance and public communication materials on this subject. Training programmes focusing on first response to radiation emergencies are also being developed in collaboration with national partners in Ukraine.
	Potential chemical hazards The Governor of the Luhansk oblast reported that the nitric acid tank at a chemical plant was shelled. Nitric acid fumes can irritate the respiratory tract and cause bronchitis, lower respiratory tract infections and pulmonary oedema.
Food security and nutrition	The conflict is affecting food security within and outside Ukraine. According to World Food Programme, one in three households in Ukraine is now food-insecure, with an estimated 600 000 people in need of nutrition support in Ukraine between March and August 2022.

2.3 WHO and partner actions in Ukraine to date

Leadership and coordination

- At the request of the MoH, WHO has prepared a video explaining how to obtain data on vaccinations for IDPs and people who have left the country as a result of the ongoing conflict. For more information, click here.
- One in four people in Ukraine is over 60, and the impact of the ongoing war on older people, including those with disabilities, has been substantial. Essential life-saving support, as well as necessary evacuation assistance, should be provided to those who have not been able or willing to leave their homes, including those living in care institutions. On 14 June WHO released a joint statement with OHCHR, UNFPA and HelpAge International on working towards upholding the rights and safeguard the health and well-being of older people through improving and sustaining health and social care provisions.

Health information and operations

The health sector response continues to prioritize saving lives and protecting mental health. Actions focus on ensuring access to emergency health care and priority essential health services for wounded people and others affected by the armed conflict, COVID-19, poliomyelitis, and other health threats – including technological, industrial, and chemical, biological, radiological, and nuclear hazards. Continuity of treatment and care for people with noncommunicable diseases – including diabetes and cancer – is a top priority.

- As many countries worldwide report cases of monkeypox, as of 15 June, no cases of monkeypox have been
 detected in Ukraine. WHO continues to provide situation updates and various guidance documents,
 including clinical management, RCCE, laboratory testing, surveillance etc. For more information, please see
 the Disease Outbreak News published on 10 June on the Multi-country monkeypox outbreak.
- WHO provided guidance to the MoH on setting up a procurement structure in Ukraine. The structure will
 allow access to specialized sexual and reproductive health medicine and equipment in Ukraine. WHO
 published a guidance document "Principles to guide health system recovery and transformation in Ukraine".

- In the week of 6 June, WHO, in collaboration with the National Health Service of Ukraine (NHSU), organized a two-day meeting on strategic planning for health-care financing in Ukraine during the war. The event provided an opportunity to review the NHSU's strategy on the regions' current needs for health financing and to discuss adapting the electronic health-care system, monitoring systems, the package of medical guarantees, contracting as well as determining the cost of primary care services and the sustainability of the health-care financing system in Ukraine.
- In the week of 6 June WHO supported the Ukraine Public Health Center (UPHC) in assessing laboratory needs (UPHC and national needs) for measles and rubella testing.
- WHO extended support through field missions to the Zakarpattya, Ternopil, Chernivtsi and Volyn oblasts to prepare for vaccination of IDPs at designated sites starting at the beginning of June.
- On 2 June WHO conducted a two-day basic chemical preparedness and response training for first responders from the Donetsk and Luhansk regions. The training was attended by 22 participants.
- WHO is setting up a hub in Vinnytsya to strengthen Emergency Medical Services (EMS) support in Vinnytsya
 and the neighbouring oblasts. The hub will also keep a contingency stock of prepositioned emergency
 medical supplies and support the provision of EMS in the oblast's rural areas, where a significant number
 of IDPs have settled.
- Between 15 and 30 May, with support from WHO, a total of 1027 vaccinations were performed in 21 IDP locations in the Rivne region. These vaccinations included 351 doses of the COVID-19 vaccine, 292 doses of the diphtheria vaccine and 141 doses of the measles, mumps and rubella vaccine.
- Based on the WHO curriculum for training health-care providers "Caring for women subjected to violence" (revised edition, 2021), the WHO Country Office developed a two-day training package for PHC providers and aims to launch this intervention in July in cooperation with the MoH, the Ukrainian Foundation for Public Health and PHC experts through the network of the PHC community the Academy of Family Medicine of Ukraine. The training objectives include:
 - o creating the understanding of SGBV as a public health problem
 - o addressing biases against SGBV survivors among PHC professionals
 - strengthening the knowledge and skills with respect to identifying survivors of SGBV and providing first-line support
 - o providing information on national legislation and guidelines on treatment options for SGBV survivors and on referral networks.

Supplies and logistics

- As of 13 June, WHO has delivered 615 metric tonnes of medical supplies to Ukraine, comprising trauma and emergency surgery supplies (TESKs), interagency emergency medical supplies (IEHKs), blood transfusion materials, essential medicines, and other critical supplies, including body bags, ambulances, power generators, refrigerators and other equipment. Of the 615 metric tonnes of medical supplies, 257 metric tonnes have been delivered to beneficiaries in 24 oblasts across Ukraine, including 500 oxygen concentrators (16.5 metric tonnes) delivered to Kyiv.
- As part of overall preparedness measures to prevent, detect and respond to cholera, WHO has prepositioned 5000 rapid diagnostic tests in Ukraine.
- In the past week the Cherkasy, Chernihiv, Chernivtsi, Dnipropetrovsk, Donetsk, Ivano-Frankivsk, Kharkiv, Kherson, Khmelnytsky, Kirovohrad, Kyiv, Luhansk, Lviv, Mykolayiv, Odesa, Poltava, Rivne, Sumy, Ternopil, Vinnytsya, Volyn, Zakarpattya, Zaporizhzhya and Zhytomyr oblasts received 14.3 metric tonnes of medical supplies (valued at US\$ 420 872).
- Fifty kits of six assistive technology products (AT6), comprising elbow crutches, axilla crutches, walking
 frames, walking sticks, wheelchairs for hospital transportation, and toilet/bath chairs, were delivered to
 hospitals in eastern Ukraine (Kharkiv, Zaporizhzhya, Mykolayiv, Dnipropetrovsk and Poltava oblasts) to
 support acute trauma care. The delivery of the AT6 kits was approved by the MoH of Ukraine and
 synchronized with the delivery of external fixators (frames used in surgeries to stabilize broken bones).

The kits were accompanied with Ukrainian-language instructions for prescribing, fitting, and training on the use of the supplied assistive products.

- WHO has delivered sufficient TESKs to treat approximately 11 952 people, and IEHKs to treat an estimated 1.7 million people for three months.
- Efforts are ongoing to deliver medical supplies from the WHO supply and logistics base in Lviv to affected oblasts amidst fuel shortages, limited warehouse capacity, and security restrictions due to ongoing military operations. Delivery of life-saving supplies to hard-to-reach locations remains a foremost priority for WHO.
- Guidelines on donations of urgently needed supplies to support the emergency response in Ukraine and neighbouring countries are available on WHO's website: Medical supply donations for Ukraine. WHO continues to engage with governments, private organizations, and biomedical and shipping companies to secure medical supply donations.

Risk communication and community engagement (RCCE) and external communications

- RCCE materials on cholera prevention and treatment have been developed.
- Message testing is being launched to measure the effectiveness of differently designed messages on access to mental health, as part of a randomized control trial.
- From 21 May to 4 June field visits were carried out to the Kyiv, Dnipropetrovsk and Zaporizhzhya oblasts for community listening sessions. The key findings were as follows:
 - Health needs are not yet prioritized in the regions. People seek health information and services mostly in case of urgent need and for chronic conditions. There is high demand for information on MHPSS and Psychological First Aid (PFA).
 - A considerable amount of information on health protection and accessing health services is available, but it remains scattered.
 - A one-stop shop information resource for IDPs on the health services offered in the area and ways of accessing them is not always available.
- After the visit, materials on MHPSS and PFA were shared with local civil society organizations (CSOs) and health workers. Materials for IDPs on accessing health services in Zaporizhzhya are being developed in partnership with the local health department.



Operational partnerships

EMTs

- Currently there are six operating EMTs and five additional teams supporting specialized care activities in Ukraine.
- In the past week (6–12 June), four international EMTS collaborated and conducted the transfer of 14 patients, of which eight were supported as part of the MoH's international medical evacuation pathway across the Polish border to the Rzeszów airport by CADUS, Global Response Management, Samaritan's Purse and the International Rescue Team.
- As of 14 June, several trainings using mixed modalities (virtual and/or face-to-face) have been conducted on topics such as advanced trauma life support (for adults and children), basic emergency medicine and trauma, surgical management of penetrating trauma, and tactical emergency casualty care.
- Between 13 March and 12 June EMTs in Ukraine responded to 4604 outpatient visits, of which 16% (736 outpatient visits) were infectious diseases and 14% (644 outpatient visits) were trauma. Among infectious diseases, 87% (640) were acute respiratory infections.

GOARN

• From 2 March to 14 June the GOARN institutions/network have been providing technical support. Currently, to address requests for support received from the countries, 10 experts are deployed (two in Denmark, two in Poland, two in Romania, two in Slovakia, one in Czechia, and one in Ukraine remotely) and five experts are scheduled to be deployed soon (two in Poland, one in Ukraine, one in Denmark, and one in Czechia). So far six experts have completed their deployment (two in Poland, one in Denmark, one in the Republic of Moldova, and two in Czechia).

Regional WHO-UN-RCM Coordination Platform for Emergencies

- On 2 June the first meeting of the Regional WHO-UN-Red Cross Movement Emergency Coordination Platform
 took place. It focused on the crisis in Ukraine and refugee-hosting countries. Representatives from 10 UN
 agencies and partner organizations were present, as well as members of the Issue-Based Coalition for Health
 (IBC-Health) and members of the WHO Regional Office for Europe's Incident Management Support Team. As a
 result of this meeting, partnerships in the Refugee Health Extension were expanded and strategic discussions are
 under way regarding the collection of data for action and how the UN and stakeholders can work more
 synergistically with governments.
- The next meeting, tentatively scheduled for 23 June, will continue the discussion on the war in Ukraine and on the refugee-receiving countries.

Health Cluster

WHO plays an essential coordination role in the response as the lead agency of Health Cluster Ukraine. As of 8 June, Health Cluster Ukraine has 136 international and local Partners, with planned, ongoing and/or completed health-related activities in 24 oblasts. The Health Cluster team continues to support the review of new projects submitted to the Ukraine Humanitarian Fund (UHF).

Additional information is available on Health Cluster Ukraine's website. Health Cluster Partners have reached over 2.7 million people.

- From 28 May to 4 June the Health Cluster Coordinator (HCC) was in Dnipropetrovsk.
 - o The HCC delivered opening remarks at the subcluster meeting, met with partners, and conducted site assessments.
 - The HCC visited a children's hospital and addressed the need for fixators using the Health Request Planning and Response (HRPR) tool.
 - Local authorities requested training on trauma care and MHPSS.
 - o The need for PHC support in rural areas was identified.
- On 5–6 June the HCC was in Zaporizhzhya to meet with partners in the field.
 - Key areas identified for strengthening: MHPSS support, food and hygiene.
 - Medical equipment needs: trauma and burn care equipment, including autoclaves and portable ventilators.
 - o Capacity building needs: trauma care, ICU, reconstructive surgery, and MHPSS.

- Kits with essential medicines were requested for IDPs on the move.
- The majority of pregnant women reportedly leave the area for western Ukraine or go abroad; no increased needs in maternity and child health care were observed.
- Dnipropetrovsk subcluster: A subcluster meeting with representatives from agencies and the Department of Health was held on 7 June.

Health Cluster Partners' presence and activities across Ukraine are mapped weekly through the 5Ws³ to chart the continuously changing humanitarian response landscape. Health Cluster Partners have completed or ongoing activities in 414 settlements in 24 oblasts and have provided support to over 160 health facilities across Ukraine.

Table 2: Number of Partners by health domain

Health domain of response activities	Number of Partners
HIV/TB	29
Sexual and reproductive health, child health and GBV	25
Trauma/mass casualties	19
NCDs	15
Mental health	11
Other communicable diseases	8
Risk communication and community engagement (RCCE)	7
Child health	4
COVID-19	4
Palliative care	2

Note: Not all Partners reported the health domains of their activities.

- The health requests, planning and response tool (HRPR) being used to respond to requests for humanitarian health assistance from Partners and health facilities is currently tracking over 190 requests.
- Analysis of the Health Cluster rapid health needs assessments, as described in the situation report published on 19 May, is ongoing.

Technical Working Groups (TWGs)

Eight new TWGs have been created since 24 February: communicable diseases; sexual, reproductive, maternal and child health; NCDs; trauma and rehabilitation; displacement and health; health logistics and supply; risk communication and community engagement; and assessments and analysis. Pre-established TWGs focusing on MHPSS, HIV/TB and opioid substitution therapy have been rapidly expanding. TWG contacts are available on Health Cluster Ukraine's website. In addition to the overview of each of the TWGs provided in the situation report published on 26 May, please find below the updates from the TWGs.

MHPSS

- o Three functioning subgroups Chernivtsi, Zakarpattya and Lviv; an Odesa subgroup is being planned.
- o Scaling-up the mhGAP programme to train PHC providers on MHPSS.
- o Working with Ukraine's First Lady, Olena Zelenska, on promoting the psychological support programme.

HIV/TB/OST

- HIV: the majority of antiretroviral treatment sites have been functional throughout the war; working with the UPHC to ensure testing/treatment for pregnant women; discussing more innovative ways of testing and providing pre-exposure prophylaxis (PrEP).
- o OST: considering expanding the opioid substitution therapy programme.
- Sexual, reproductive, maternal and child health
 - o UNFPA has deployed mobile teams for sexual, reproductive, maternal and child health.

³ The 5W matrix aims to understand the operational presence and activities of the Health Cluster Partners in response to humanitarian emergencies. The tool refers to What, Who, Where, When and for whom.

- o Developing a guidance document for the clinical management of rape.
- o Improving coordination among partners of the Emergency Reproductive Health and Dignity kit distribution.
- o Planning a subnational cluster group in Dnipropetrovsk.

NCDs

- WHO and Act4Health launched mobile health units for NCDs in five oblasts; six mobile teams will be deployed to temporarily occupied territories (TOTs) for the next three months in coordination with the Kyiv oblast.
- o Collaborating with the UPHC on the development of communication materials.

Trauma and rehabilitation

- Web page established on the Health Cluster website.
- Mapping where EMTs are present/needed; working with the MoH on how to task international EMTs.

• Displacement and health

Meeting on 13 June: presentation on the IOM Ukraine internal displacement report: Area baseline report - Round 4; 6 June 2022.

Health logistics and supply

 First meeting on 9 June: attended by five partners; nine participants; discussion on importation of medicines, including SOPs for the importation of narcotics and psychotropics, and facilitating the procurement, storage and distribution of medicines, medical supplies and equipment.

RCCE

- Finalized mapping of existing RCCE resources in Ukraine.
- o Working with the MoH and UPHC on priority areas.
- o Launching a rapid health information needs assessment.
- Facilitating regional distribution of materials.
- Assessment and analysis
 - Meeting on 22 June: 21 participants; REACH/IMPACT presented on their infrastructure and hazardous facilities damage assessments



3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Overall WHO actions in some refugee-hosting countries

On 7 June a seminar was held with the European Commission, WHO and the MoH of Ukraine to discuss the various initiatives in the neighbouring countries. The focus was on ways to absorb refugees with health professional backgrounds in neighbouring countries, while allowing the return of health-care workers for reconstruction efforts in Ukraine. The WHO Behavioural Insights Unit is working closely to support refugee-hosting countries to conduct a qualitative study with Ukrainian refugees to better understand their perceived health needs as well as barriers and drivers of access to and use of health services.

3.2 Specific WHO actions in select refugee-hosting countries

Czechia

Situation update

Between 24 February and 15 June an estimated 373 965 Ukrainian refugees entered Czechia.

WHO actions this week

- On 6 June the WHO Representative for Ukraine met with the Deputy Minister of Health of Czechia, who is
 in charge of the Ukraine Refugee crisis response, to discuss aligning the Government's plans and WHO/UN
 support in the area of health. WHO was asked to support the position of a response coordinator in the
 MoH, among other topics discussed. The WHO Representative presented a draft Regional Health Sector
 Strategy for the crisis response and ideas about revising the country's response plan in line with the strategy
 and the changing needs in the country.
- WHO provided an overview of the results of the behavioural insights studies to inform the new MoH COVID-19 vaccination campaign, which is to be developed for a vaccination drive before autumn 2022.

Hungary

Situation update

Between 24 February and 13 June an estimated 764 216 Ukrainian refugees entered Hungary.

WHO actions this week

- WHO continues to meet with the Government of Hungary to further coordinate the refugee response.
- WHO will work to support Hungary with respect to long-term planning and strategy.

Poland

Situation update

- Between 24 February and 13 June an estimated 3 954 957 Ukrainian refugees entered Poland, accounting for 52% of the total refugee population.
- As of 13 June the MoH reported that 1500 people of Ukrainian nationality were currently being treated in Polish hospitals.
- The MoH signed a decree under which the catalogue of data collected by medical personnel was expanded to include, among others, allergies, blood group and pregnancy.
- Sixteen teams are registered in Poland so far, and 12 of them are providing clinical care to refugees.

WHO actions this week

• In the refugee response data portal, a page is dedicated to assessments and data initiatives, which can also be filtered by health sector. The assessments and data initiatives reflected there are posted by the IOM

- (Entry intentions survey), Save the Children (Snapshot monitoring survey completed), IRC (RNA report completed), UNICEF and WHO.
- Following a joint review of the pilot survey conducted by Statistics Poland, the tools are being revised and
 a full-scale survey in two selected regions with 1500 interviews as the first stage of the survey is to be
 conducted in the first half of June 2022. On 3 June WHO held a meeting with the President of Statistics
 Poland, where the parties agreed to continue the cooperation in surveying Ukrainians in Poland and their
 health status and concerns.
- IMC and the Poland MHPSS TWG are facilitating MHPSS referral pathways workshops as of 13 June in Warsaw, Kraków and Wrocław.
- WHO has supported the mapping of actors involved in the rehabilitation response to understand the overall situation of Ukrainian refugees in Poland.
- A mapping exercise was conducted to identify CSOs that are working on providing health advice to
 Ukrainian refugees and/or supporting them with health-related services. A social listening system is being
 set up to capture insights into the behaviours, perceptions, questions and challenges of Ukrainian refugees
 in relation to their health and finding medical services, such as vaccination.
- EMT Coordination Cell (CC):
 - o A new registration system for EMTs is available in Poland since 26 April. It was made publicly available on the dashboard to provide information on EMTs.
 - O Between 4 May and 12 June 2022, seven daily reports have been submitted to the EMT CC from six operating EMTs: NATAN Worldwide Disaster Relief, Polish Medical Mission, International Medical Coprs, Hadassa Israel, Polish Center for International Aid (PCPM), and Humanity First. The initial analysis of the data includes statistics stemming from 1781 consultations with patients, of whom 71% are non-pregnant women, 1 % are pregnant women and 28% are male patients.

Republic of Moldova

Situation update

- Between 24 February and 13 June an estimated 498 896 Ukrainian refugees entered the Republic of Moldova.
- To date, 87 refugee accommodation centres provide shelter to 37 306 people (total capacity: 7351). Of these, 18% are pregnant and lactating women, 25% are people with disabilities, 3% are people with serious medical conditions, 6% are minors aged 0–2 years, 37% are children between 2 and 18 years old, and 9% are older people.
- According to the Commission for Exceptional Situations from 30 May 2022, child refugees from Ukraine aged 0–18 years are eligible to receive medical services covered by the Unique Programme of Mandatory Health Insurance Services (PUAOAM), contracted by the National Company for Health Insurance from the health-care providers enrolled in the AOAM system.
- In the Republic of Moldova there are five EMTs on the ground and one operational EMT.

WHO actions this week

- The tenth online interagency refugee health working group meeting took place on 8 June and was attended by more than 40 representatives of UN agencies, donors, and NGOs.
- The MoH and the National Agency for Public Health, with support from WHO and the European Union, conducted vaccination campaigns in Sîngerei and Călărași on 2 June and 6 June, respectively. More than 200 participants were present, in addition to heads of institutions and departments from local authorities.
- A 10 m3 cold chain storage room for vaccines was provided and installed in Comrat as a strategic vaccine warehouse for the population of three districts (Comrat, Ceadîr-Lunga and Vulcănești). The vaccines are being provided to both the host population and the refugees.
- On 6 and 14 June two additional local immunization campaigns were launched in the Călărași and Căușeni districts, with more than 300 heads of institutions and departments of local authorities participating.

- On 11 June WHO conducted a field mission for rapid needs assessment with the EMT coordinator to
 organize health service delivery by the EMTs to truck drivers in case of crises associated with border crossing
 delays.
- WHO supported the medical evacuation of three cancer patients and four family members as part of the EU Civil Protection Mechanism.
- WHO donated 700 sets of containers with a solution for hand hygiene and 1070 litres of drinking-water.
- EMT CC:
 - The WHO EMT CC supervised the work of seven EMTs, who provided 3613 health-care consultations for refugees at refugee accommodation centres.
 - As of 15 June, 147 cases of acute watery diarrhoea have been reported, of which 24 are among children under five years of age. In addition, two cases of tuberculous bronchitis were reported. All cases are currently being monitored by EMTs.
 - o In June 5.7% (14) of mental health consultations identified acute mental health problems (AMHPs). The prevalence of AMHPs diagnosed in such consultations is increasing. This could be due to the following factors: MHPSS professionals among team members, increased reporting of such cases, increased demand due to the fact that basic needs are partially covered, but the overall situation in Ukraine is unstable, etc.
 - o Approximately 21% of reported outpatient visits are related to infectious diseases.

Romania

Situation update

Between 24 February and 13 June an estimated 642 159 Ukrainian refugees entered Romania. However, most are in transit to other countries, primarily to Hungary (30%) and Bulgaria (20%).

WHO actions this week

- On 3 June WHO conducted a field mission to the refugee service points and met with local implementing partners at Banská Bystrica, Košice, Michalovce, and border crossing points in Vel'ké Slemence, Vyšné Nemecké and Ubl'a.
- On 6–10 June WHO carried out a protection against sexual exploitation and abuse (PSEA) mission to explore PRSEAH and identify potential support needed from WHO for Romania's response.
- A sexual and reproductive health expert will provide support and advocate with stakeholders to operationalize the national reproductive health strategy. WHO and the MoH plan to meet with clinicians to discuss medical abortion and use of telemedicine in Romania.
- WHO is carrying out ongoing mapping of family physicians ready to enrol refugees. Offers are being planned to enable health service providers to work with refugees (i.e. two-way translation devices).
- WHO procured cold chain equipment for vaccine transportation for the MoH.
- WHO is supporting an ongoing study to understand the perceived health service needs, barriers and drivers
 experienced by refugees in accessing health-care services. The purpose is to inform effective and
 appropriate health-related policies, services, communication, and other health interventions. Data collection
 in Romania has recently concluded and analysis is under way. A stakeholder meeting that will include key
 government decision-makers and partners is planned for the first week of July.
- WHO's rapid MHPSS service mapping process has been finalized.

Slovakia

Situation update

- Between 24 February and 13 June an estimated 501 335 Ukrainian refugees entered Slovakia.
- As of 14 June, 81 288 refugees have requested temporary protection in Slovakia and 189 people have applied for asylum.

- From 1 July new rules should apply to Ukrainians using railways, buses and municipal public transport in the Košice and Prešov self-governing regions. So far, the proposed changes include a five-day limit on free use of transport after crossing the border.
- Slovakia has officially joined the Joint Investigation Team to help investigate war crimes and crimes against humanity committed in Ukraine

WHO actions this week

- The WHO Director-General visited Slovakia and participated in the GLOBSEC 2022 Bratislava Forum organized by GLOBSEC – a non-partisan NGO – and held a series of meetings with high-level Slovak representatives.
- On 13 June a coordination meeting with representatives of WHO, the MoH, UNICEF, IOM, and IFRC took
 place to discuss the situation of Ukrainian refugees in Slovakia currently with the priority topic: mid- to
 long-term accommodation.
- WHO's rapid MHPSS service mapping process has been finalized.

Resources

- Public Health Situation Analysis (PHSA) Ukraine, 29 April 2022
- Public health situation analysis: refugee-hosting countries, 17 March 2022
- Previously published Situation Reports: Emergency in Ukraine
- Guidance Note for Medical Supply Donations
- Ukraine emergency webpage
- Health cluster; Emergency Medical Teams (EMT)
- Dashboards with the most recent posts across Facebook, Instagram and Twitter